

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>MM</i>	<i>7097</i>	<i>10/20</i>
O.I.P.E. CLASSIFIER	<i>BM</i>	<i>11</i>	<i>10/20/00</i>
FORMALITY REVIEW	<i>Q. J. L.</i>	<i>JC 82.6</i>	<i>11/08/00</i>
RESPONSE FORMALITY REVIEW	<i>L. J. L.</i>	<i>JC 851</i>	<i>12-19-00</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 " ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
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Claim	Date
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If more than 150 claims or 10 actions  
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